U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to compty may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

E	
1. File Number U - 2778	2. Fiscal Year Covered From:
	1/1/04 Through: 12/31/04
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Ricky R HENSON SR.	Name LABORERS INTL LOCAL 41
	Labor Organization File Number 222.100
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 2907 Chough Ave.	Street 6415 KENNEBY AVE.
City HIGHLAND	CHY HAMMOND
State In . ZIP Code + 4 4632	State 71. ZIP Code + 4 4632 3
5. Position in labor organization.	ASST. Mar. = FIGD Rep.
Enter appropriate data below if, during the past fiscal year, you or your sponsor (except as specified in the except as specified in the except an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizate	usions set forth in the instructions): derived income or other economic benefit of
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
No.	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	7.b. Amount.
City	
State ZIP Code + 4	
Sig	nature
15. Signature and verification. The undersigned declares, under penalty o submitted in this report (including the information contained in any accompar undersigned's knowledge and belief, true, correct, and complete. (See the s	ying documents), has been examined by the signatory and is, to the best of the
Signed Kely Klasan &c.	on 1/8/05 219-923-9985
The state of the s	Date Telephone Number

Form LM-30 (2003)

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
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City State ZIP Code + 4	P.O. Box, Bldg., Room No., if any	
State ZIP Code + 4	Street	
14.b. Amount of payment.	City	
13.b. Is the Business an Employer or Consultant ?	State ZIP Code + 4	
	13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Name of Person Filing Kicky K. Henson	SR, File Number U- 2778
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherwoof an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or India dealing with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent, or rectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name Stewart C. Miller & Co Trade Name, if any: Administrative Proceduce P.O. Box, Bldg., Room No., if any Street 211 West Lincoln Huy. City Merrillyille State In 211 ZIP Code +4 46410	9. Business deals with: a. Labor Organization b. Trust c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name. Name ONSTRUCTION Worker's DANSION Trade Name, if any: P.O. Box, Bldg., Room No., if any Street Why Lincoln Huy. City Merrilville State Jn., ZIP Code + 46, 410	11.a. Nature of such dealing. CAN of Popcore N 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.
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C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment.
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Name of Person Filing Kicky K. HENSON	6. File Number U- 2778
B. Held an interest in or derived income or economic benefit with monetary value substantial part of which consists of buying from, selling or leasing to, or otherwoof an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization	ise dealing with the business ely seeking to represent, or rectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name Legacy Fotessional Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 930 Calumet Ave. City Munster State Limit ZIP Code +4 46410	9. Business deals with: a Labor Organization b. Trust c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name LABORETS LOCAL 41	DINNER #123.00 LUNCH 27.00
Trade Name, if any:	LUNCH 27.00
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city Hammond	12.a. Nature of interest held or income received.
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13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
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State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Person Filing Kicky K. HENSON	SR. File Number U- 2778
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Trade Name, if any:	BASEBALL TICKETS 66.50
P.O. Box, Bldg., Room No., if any	
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C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
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Street	
State 719 Code + 4	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Name of Person Filing Kicky K. JENSON	SR.	File Number U- 2778
B. Held an interest in or derived income or economic benefit with monetary valus ubstantial part of which consists of buying from, selling or leasing to, or otherw of an employer whose employees your labor organization represents or is activ (2) any part of which consists of buying from or selling or leasing directly or India dealing with your labor organization or with a trust in which your labor organization.	ise dealing with the busines ely seeking to represent, or rectly to, or otherwise	s
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Name of Person Filing Kicky K. HENSON	SR. File Number U- 27	78
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10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
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13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	

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